

The filing fee is calculated as follows:

	CLAIMS AS FILED			
	NUMBER FILED	NUMBER EXTRA	LARGE ENTITY	AMOUNT
Basic Fee	29			\$ 750.00
Total Claims	20	-20 =	x 18.00	\$ 144.00
Independent Claims	2	-3 =	\$80.00	\$.00
Assignment Recording Fee			40.00	\$ 40.00
Multiple Dependent Claim Fee			270.00	
Other				
			TOTAL FEE	\$ 934.00

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Please record the accompanying Assignment.

Please charge Deposit Account No. 50-0749 in the amount of \$ 934.00 for filing fees.

Check in the amount of _____ for Filing Fee.

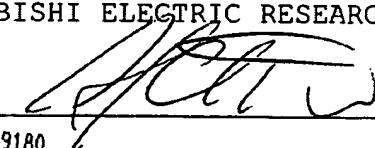
The Assistant Commissioner for Patents is hereby authorized to charge any additional fees due or credit any overpayment to Deposit Account No. 50-0749.

All future correspondence should be addressed to:

Patent Department
Mitsubishi Electric Research Laboratories, Inc.
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Duplicate copies of this letter are enclosed.

Respectfully submitted,
MITSUBISHI ELECTRIC RESEARCH LABORATORIES, INC.

By: 

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